## Fiscal Estimate - 2007 Session

	Original		Updated		Correct	ed		Supple	emental
LRB	Number	07-2138/2		Intro	duction	n Numbe	er S	B-129	*
<b>Descr</b> Requir contra	ing a hospital	I to provide to a providing a pena	ı sexual assault alty	victim info	mation a	ınd, upon h	er requ	est, eme	ergency
Fiscal	Effect								
	No State Fisc Indeterminate Increase E Appropriat Decrease Appropriat Create Ne	e Existing tions Existing	Revenu Decrea Revenu	se Existing	t.		b within Yes	agency	e possible 's budget \B\No
	Indeterminate  1.  Increase Permiss  2.  Decrease	e Costs sive  Mandato	3.  Increas ry Permiss 4.  Decrea	e Revenue sive	ndatory e	5.Types of Governm Towr Coun Scho Distri	ent Unins [	ts Affect Village Others WTCS District	Cities
Fund Sources Affected Affected Ch. 20 Appropriations  GPR FED PRO PRS SEG SEGS									
Agenc	y/Prepared E	<u></u> Зу	Au	uthorized S	Signature	9			Date
DHFS/ Ellen Hadidian (608) 266-8155 And				ndy Forsaith (608) 266-7684 4.					4/23/2007

## Fiscal Estimate Narratives DHFS 4/23/2007

LRB Number 07-2138/2	Introduction Number	SB-129	Estimate Type	Original				
<b>Description</b> Requiring a hospital to provide to a sexual assault victim information and, upon her request, emergency contraception and providing a penalty								

## **Assumptions Used in Arriving at Fiscal Estimate**

The Department is currently required to issue certificates of approval to hospitals that meet the Department's requirements.

SB 129 requires hospitals to provide certain services to victims of sexual assault, if the hospital provides emergency services to a victim, as a condition of meeting the Department's requirements. Specifically, the hospital must provide the victim, with the victim's consent, with medically and factually accurate information about emergency contraception, orally inform her of her options to receive emergency contraception, orally inform her of her option to report the sexual assault to a law enforcement agency, and provide emergency contraception if she requests it.

This bill defines emergency contraception as medicine or a device that prevents a pregnancy after sexual intercourse and specifically excludes medicine or devices that are prescribed to terminate a pregnancy. The bill requires hospitals to ensure that their employees who provide information to a sexual assault victim have available medically accurate and unbiased information about emergency contraception. The Department is required to respond to complaints about violations of these requirements and must review hospital procedures to make sure they are compliant. A forfeiture may be required of violators of the statute created under this bill.

The Department is required to monitor compliance with hospital regulations and to respond to complaints about any violations. The annual costs of responding to violation complaints are estimated to be \$1,300 GPR per complaint. It is not possible to estimate how many complaints would be received. DHFS would monitor compliance during its hospital surveys. The federal government authorizes 11 surveys per year. The cost of adding this component to each survey is estimated to be \$555 GPR per survey, for a total annual cost of \$6,100 GPR.

The Department's hospital compliance staff are currently funded by both state (GPR) and federal funds. The additional workload from this bill will reduce the time staff can allocate to federal programs and, therefore, reduce federal funding. State funding will be required for the new, state-only workload prescribed in SB 129.

SB 129 may result in reduced costs to the Department's Medical Assistance program. Emergency contraception has been shown to be effective in reducing abortions. The Medicaid program allows abortions in cases of sexual assault. If a sexual assault victim is also a Medicaid recipient, her ability to receive emergency contraception may reduce future Medicaid abortion costs. Emergency contraception could result in fewer Medicaid funded births, which would also reduce costs to the program. It is not possible to estimate the extent of these savings.

This bill will have no fiscal effect on local units of government.

Long-Range Fiscal Implications

## Fiscal Estimate Worksheet - 2007 Session

Detailed Estimate of Annual Fiscal Effect

×	Original		Updated		Corrected		Supplemental			
LRB	3 Number	07-2138	/2	Intr	oduction Nur	mber	SB-129			
Requi	<b>ription</b> iring a hospita gency contrac				information and,	, upon her	request,			
	e-time Costs alized fiscal e		Impacts for	State and/o	or Local Govern	ment (do	not include in			
II. An	nualized Cos	its:			Annualized Fiscal Impact on funds from:					
					Increased Cost	is	Decreased Costs			
	ate Costs by									
	te Operations		ıd Fringes		\$5,50	0	\$			
<del></del>	E Position Ch									
<del></del>	te Operations		S		60	0				
	cal Assistance									
	s to Individual									
	TOTAL State				\$6,10	<u> </u>	\$			
	ate Costs by	Source of Fu	unds							
GPI					6,10	<u> </u>				
FE										
	O/PRS									
<u> </u>	G/SEG-S									
III. Sta reven	ate Revenues nues (e.g., tax	s - Complete ाncrease, d	this only whecrease in li	nen propos icense fee,	sal will increase ets.)	or decrea	ase state			
					Increased Re		Decreased Rev			
<del></del>	R Taxes				\$	3	\$			
	R Earned									
FEC						_				
	O/PRS									
	G/SEG-S									
<u> </u>	OTAL State I				\$	<u>:                                    </u>	\$			
			NET ANNUA	LIZED FISC	CAL IMPACT	<del></del>				
NET CHANCE IN COOTS					State		Local &			
NET CHANGE IN COSTS NET CHANGE IN REVENUE					\$6,100		\$			
NEIC	MANGE IN D	EVENUE		L	\$		\$			
Agend	cy/Prepared B	Ву		Authorized	d Signature		Date			
DHFS/ Ellen Hadidian (608) 266-8155 And				Andy Forsa	ndy Forsaith (608) 266-7684 4/23					